


Idaho Department of Correction  	<b>Standard Operating Procedure</b>	Title: <b>Program Management: Offender</b>		Page: 1 of 31
		Control Number: <b>607.26.01.014</b>	Version: <b>3.0</b>	Adopted: 12-18-2010

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Revision date (09/18/2015) version 3.0: Administrative change to remove the phrase "therapeutic community".
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## BOARD OF CORRECTION IDAPA RULE NUMBER 607

Public Participation in Program Activities

## POLICY CONTROL NUMBER 607

Correctional Education and Programs

## DEFINITIONS

**Acute 2007:** A specific sex offender risk assessment instrument that measures factors that can change over a period of weeks, days, and hours that may indicate the likelihood for sexual re-offending.

**Case Management File:** An approved collection of legal documents, reports, submissions, statements, and support materials used in making decisions about an inmate (offender), parolee, or probationer regarding classification, treatment, programming, management, and parole or clemency.

**Chief Psychologist:** The department employee who is primarily responsible for overseeing or managing the department's mental health services.

**Clinician:** The primary deliverer of mental health services to offenders.

**Detainer:** A warrant placed against an offender in a federal, state, county, or city jail, which notifies the holding authority of the intention of another jurisdiction to take custody of that individual when he is released.

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**Level of Care (LOC):** A system utilized by the Idaho Department of Correction (IDOC) in which offenders with mental health issues are assigned a LOC based upon the severity of their mental illness and degree of treatment needs.

**Level of Service Inventory (LSI):** An instrument used to sample an offender's risk factors in order to provide a comprehensive risk and needs assessment, which is necessary in identifying offender treatment planning and supervision. The LSI is used to screen for crime-producing attributes based on a total score with results presented in 10 subscale domains. (All references to LSI include all subsequent revisions.)

**Mental Health Professional:** A staff member who has specialized training and skills in the nature and treatment of mental illness to include, but not limited to, psychologists, psychiatrists, clinical social workers, and clinicians who, by virtue of their education, credentials, and experience, are permitted by law to evaluate and care for patients.

**Motivational Interviewing:** An emphatic goal-directed communication style used in both group and individual settings to help offenders battle addiction and promote behavior change.

**Offender Management Plan (OMP):** A computer-based system maintained within the Corrections Integrated System (CIS) that is used to record, monitor, and track the program activity of an offender.

**Parolee:** An offender who (1) is released from a facility by the paroling authority prior to the completion of his sentence, (2) agrees to comply with certain conditions established by the paroling authority, and (3) remains under the control of a probation and parole officer (PPO) for the established period of supervision.

**Probationer:** An offender who the courts allow to continue to live and work in the community--instead of being sent to prison--while being supervised by a probation and parole officer (PPO) for an established period of time.

**Reception/Diagnostic Unit (RDU):** Initial housing for newly committed offenders--except those under sentence of death--where orientation, screening, assessment, and classification occur.

**Rider:** A common term used for a retained jurisdiction inmate.

**Stable 2007:** A specific sex offender risk assessment instrument that measures factors which are potentially changeable but endure for months or years.

**Static 99:** A specific sex offender risk assessment instrument that contains the four (4) Rapid Risk Assessment for Sexual Offense Recidivism (RRASOR) items and six (6) additional items. The static 99 yields separate long-term probabilities for sexual and/or violent re-offense risk. (All references to static 99 include all subsequent revisions.)

**Termers and/or Timers:** Committed offenders under the jurisdiction of the Idaho Department of Correction (IDOC).

**Test of Adult Basic Education (TABE):** Specialized screening and test that provides both preliminary (locator) and in-depth (comprehensive battery) measures of basic reading, mathematics, and language skills.

**Violation:** An offender's failure to comply with the terms or conditions of supervision.

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## PURPOSE

The purpose of this standard operating procedure (SOP) is to (a) establish guidelines and requirements for offender program management, and (b) explain Idaho Department of Correction (IDOC) core philosophy and intervention tools and standards for offender assessment, offender management plan (OMP) development and management, and treatment.

## SCOPE

This SOP applies to any IDOC staff member (to include contract staff and subcontractors) involved in the (a) program management of offenders, and (b) development of OMPs through the use of assessments.

## RESPONSIBILITY

### ***Director of Education, Treatment, and Reentry (or Designee)***

The director of Education, Treatment, and Reentry (or designee) is responsible for overseeing implementation and compliance with this SOP.

### ***Facility Heads and Probation and Parole District Managers***

Facility heads (to include contract facility heads) and probation and parole district managers are responsible for implementing this SOP and ensuring that staff members practice the provisions provided herein.

**Note:** Nothing in this SOP shall be construed to relieve contractors and/or subcontractors of any obligation and/or responsibility stipulated in respective contractual agreements.

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## GENERAL REQUIREMENTS

### 1. Background

The Education, Treatment, and Reentry Unit, in strong partnership with the Prisons Unit **and** Community Corrections Unit, developed a comprehensive offender management model and structured education, treatment, and pathways (see [section 4](#)) to address the comprehensive nature of offender change.

The IDOC rehabilitative approach embraces evidenced-based practices in assessment, pathways (see [section 4](#)) selection, and pathways delivery. The model seeks to clearly define effective pathways to success (see [section 4](#)) while ensuring the flexibility and responsiveness to address the individual and unique needs of a diverse offender population. The model fosters a close collaboration among security (correctional officers and probation and parole officers), Education, Treatment, and Reentry Unit, Commission of Pardons and Parole, and contract service staff.

### 2. Core Philosophies

Utilizing the very best attributes of effective assessment, treatment, and case management (see [section 7](#) and [section 8](#)), the IDOC will deliver an offender management philosophy with core attributes that will embrace the following concepts:

- Strength-based (supportive accountability);
- Assertive case management; and
- Solution-focused interventions.

**Note:** For further details review the [Pathways for Success Manual](#).

### 3. Core Intervention Tools for Offender Engagement

Effective engagement of the offender population is critical to any successful model of offender change. The IDOC will employ only those methods that foster respect and accountability without ever compromising the safe operation of its correctional facilities and probation and parole districts. The tools will foster communication, technology, and partnerships. The tools will include, but will not be limited to, the use of the following components:

- Motivational interviewing (MI);
- Technology (Corrections Integrated System [CIS] and data analysis); and
- Collaboration (internal, Commission of Pardons and Parole, and other public and private entities).

**Note:** For further details review the [Pathways for Success Manual](#).

### 4. Pathways for Success

#### ***Primary and Individual Need Pathways***

The pathways for success are made up of 16 primary pathways and three (3) individual pathways. Each pathway contains multiple program deliverables to address the

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assessed needs of each individual offender. All pathways are gender responsive and provide pre-release activities as part of structured reentry.

The **primary pathways** include:

- Pathway # 1 – low-risk criminogenic
- Pathway # 2 – low-risk substance abuse
- Pathway # 3 – criminogenic (a and b)
- Pathway # 4 – intensive substance abuse (a and b)
- Pathway # 6 – high-risk criminogenic
- Pathway # 7 – high-risk intensive substance abuse
- Pathway # 8 – sex offender low-risk criminogenic
- Pathway # 9 – sex offender low-risk intensive substance abuse
- Pathway # 10 – sex offender medium-risk criminogenic
- Pathway # 11 – sex offender medium-risk intensive substance abuse
- Pathway # 12 – sex offender high-risk criminogenic
- Pathway # 13 – sex offender high-risk intensive substance abuse
- Pathway # 14 – new directions varied level (male rider)
- Pathway # 15 – low-risk substance abuse (intensive substance abuse female rider)
- Pathway # 16 – Correctional Alternative Placement Program (CAPP) (90-day residential services for parole violators and riders; programs delivered by contractor)

The **individual pathways** include:

- Health care (medical and mental health)
- Family reunification
- Education and/or vocational

**Note:** For further details review the [Pathways for Success Manual](#).

### ***Inclusion and Exclusion Criteria***

Each pathway possesses specific inclusion and exclusion criteria which are specifically detailed in the [Pathways for Success Manual](#) and are to be utilized by staff selecting pathway direction.

All offenders (except those with no parole eligibility date [PED]) will be assigned a pathway. Those offenders sentenced to 'life with no parole', 'death', or any fixed sentence with no indeterminate portion, will not be assigned a pathway. Once a fixed sentence offender is within one year of topping his sentence, the case supervisor may assign programming, as appropriate. If a sentence changes for an offender, it is the responsibility of the case supervisor to assign a pathway, if that becomes appropriate.

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## 5. Offender Assessment

### ***Risk Assessments***

Assessment or screening instruments shall be used to assist IDOC staff members in making appropriate identification, placement, and pathway (see [section 4](#)) decisions. The purpose of the assessment process is to determine the crime-producing attributes of each offender. The factors to be assessed consist of the following:

- Anti-social and pro-criminal attitudes, values, beliefs, and cognitive-emotional states
- Criminal associates and isolation from pro-social others
- Temperament and personality factors conducive to criminal activity, such as psychopathy, impulsivity, egocentrism, or risk-taking
- Weak problem-solving skills
- History of anti-social behavior
- Family factors
- Low levels of education, vocational, or financial achievement
- Substance abuse

### ***Primary Assessment***

The following instruments are used in the initial assessment process.

- Level of Service Inventory (LSI)
- Texas Christian University Drug Screen II (TCU-DS II)
- Static 99
- Test of Adult Basic Education (TABE) – For all primary education assessments, see SOP [607.26.01.012](#), *Educational Practices, Procedures, and Placements*.

All additional primary screening or assessment instruments administered within the IDOC must first be approved by the Program Standards Committee (see directive [607.26.01.001](#), *Program Standards Committee, Development and Evaluation*) and the director of Education, Treatment, and Reentry (or designee).

To administer assessments, staff members must be professionally trained through an IDOC-approved program. LSI, TCU-DS II, static 99, and TABE assessment and reassessment results are entered in the assessment portion of the OMP module (located within the CIS).

### ***Individual Assessments***

The IDOC uses individual assessments to further evaluate offenders in specific areas such as mental health, substance abuse, responsivity factors, and sex offender attributes. Individual assessment needs will be determined by IDOC staff administering assessments and can be administered by either trained IDOC staff members or outside providers. Individual assessment needs should be incorporated into the offender's OMP. When considering the use of individual assessments, priority should be given to moderate and high-risk offenders. Factors that indicate the need for individual assessments include, but are not limited to, the following:

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- Initial assessments do not provide information adequate to determine a pathway for success (see [section 4](#)).
- Initial assessments indicate the need for additional assessment.
- The offender's behavior or condition appears complex or specialized.
- An external provider or stakeholder requests further assessment.

### ***Initial Assessment Standards in Correctional Facilities and Probation and Parole Districts***

#### **LSI**

- **Approval of Assessments and Reassessments** – A supervisor must approve all LSI assessments and reassessments completed by probationary staff members until they have successfully completed probation. For non-probationary staff members who are newly trained to conduct LSI assessments, a supervisor must approve all LSI assessments for a period of six (6) months.
- **LSI Assessment/Reassessment Interview Standards** – To accurately score the LSI, staff members will always conduct an interview with the offender when completing an initial LSI assessment. To accurately score the LSI assessment, staff will use additional information such as police reports, arrest records, presentence reports, and collateral contacts with family, friends, victims, and employers. For offenders while incarcerated, if the LSI is accurate at the Reception/Diagnostic Unit (RDU), it would not be re-done during incarceration. In probation and parole districts, LSIs are re-done yearly for moderate and high-risk offenders, reviewed yearly for low-risk. If there is an event that would change the supervision level or one of the domain scores, the LSI should be re-done using the above process.
- **Assessment Reviews and Audits** – A supervisor will review LSI assessments and reassessments from the OMP module (located within the CIS) when doing case audits and reviews. The supervisor may have non-probationary staff members submit LSI assessments on an individual basis for quality assurance.

#### **TCU-DS II**

The assessment consists of a questionnaire that the offender completes. Staff must verify the offender's responses and confirm the accuracy of the responses by conducting a file review and making any necessary changes to the offender's responses.

#### **Static 99**

The static 99 is a brief actuarial instrument designed to estimate the probability of sexual and violent recidivism among adult males who already have been convicted of at least one sexual offense against a child or non-consenting adult. The scale contains 10 items:

- Prior sexual offenses;
- Prior sentencing dates;
- Any convictions for non-contact sex offenses;
- Current convictions for non-sexual violence;
- Prior convictions for non-sexual violence;



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- Unrelated victims;
- Stranger victims;
- Male victims;
- Young; and
- Single.

The static 99 is **not** recommended for adolescents (less than 18 years of age at the time of release); female offenders; or offenders who have only been convicted of prostitution, pimping, public toileting (sex in public locations with consenting adults), or the possession of indecent materials.

### ***OMP Assessment Documentation***

The LSI will be administered through the assessment section of the OMP module (located within the CIS). The LSI, TCU-DS II, and static 99 results are recorded in the OMP module.

The TABE assessment results are also displayed in the OMP module.

### ***Probation and Parole Districts: Assessment Practices before Sentencing***

Using directive [702.04.02.001](#), *Presentence Investigation and Report*, probation and parole staff will ensure that a current LSI is completed before sentencing.

### ***Probation and Parole Districts: Assessment Practices***

#### **LSI**

Probation and parole staff shall refer to SOP [701.04.02.001](#), *Probation and Parole Supervision Strategies*.

#### **Static 99**

Probation and parole staff shall refer to SOP [701.04.02.006](#), *Sex Offenders: Supervision and Classification*.

### ***Probation and Parole Districts: Supervising Offenders without Assessments***

#### **Probationer**

If an LSI has not been conducted when a probationer is assigned to a PPO for supervision, the offender will be supervised as high-risk until the initial assessment is completed.

For interstate compact offenders, an initial LSI should be completed during signup and no later than 30 days from the case assignment.

#### **Parolee**

When a parolee does not have a current LSI, the supervising PPO will supervise the offender as a high-risk until the LSI is completed. The LSI assessment should be completed no sooner than 60 days and no longer than 90 days from the date of the case assignment. The supervising PPO will ensure there is a current TCU-DS II, if appropriate.

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***Probation and Parole Districts: Schedule for Reassessments While on Probation or Parole***

**Moderate to High-risk**

Offenders are reassessed every 12 months or if a change occurs that would affect the LSI score to include, but not limited to, the following:

- Positive urinalysis test;
- Job loss;
- Change in residence;
- Arrest; and
- LSI was scored incorrectly.

**Low-risk**

Low-risk offenders are not reassessed, unless a change occurs in an offender's circumstances that will change the LSI score.

If the score of the LSI will change, it must be administered and the results displayed in the OMP module (located within the CIS).

***Probation and Parole Districts: Reassessment for Probation and Parole Violators***

When an offender is in custody because of a violation, the supervising PPO is responsible to review the LSI to ensure that it is current and accurate in accordance with this SOP. This should be done within one week of incarceration. Although the supervising PPO may have actively supervised the offender, an interview is recommended because:

- Violation status indicates a significant change in the offender's life has occurred.
- Often offenders are more open because of the crisis they face.
- Assessing the offender's attitude is important for the PPO to determine if any intermediate sanctions or treatment options are appropriate.
- If probation or parole is revoked, the presentence investigator, court, Commission of Pardons and Parole, and IDOC correctional facilities need accurate information to make decisions regarding the placement and treatment of the offender.

***Correctional Facilities: Assessment Practices in the RDU***

**LSI**

Using the OMP module (located within the CIS), RDU staff will administer an LSI on all offenders who do not have a current (within the previous 12 months before incarceration) and accurate (all significant changes in the offender's situation are reflected) LSI.

**TCU-DS II**

Using the OMP module (located within the CIS), RDU staff will administer a TCU-DS II on all offenders who did not have a TCU-DS II administered during the PSI.

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### **Static 99**

Using the OMP module (located within the CIS), RDU staff will administer the static 99 on all adult male offenders whose commitment crime is sexual in nature if there is not already one on record. Additionally, if a male offender has past adult sex offenses the static 99 will also be administered. If a staff member is unclear about an offender's information he will defer to the chief psychologist for input.

### **TABE**

During the RDU process offenders are screened for educational needs. Education staff will review the assessment to facilitate the programmatic process relative to the offender's academic or vocational needs. Educational staff shall ensure all appropriate academic or vocational coursework is recommended as indicated by the OMP or TABE assessment results. (For further information regarding education see SOP [607.26.01.012](#), *Educational Practices, Procedures, and Placements*.)

### **Medical Screening**

Medical staff will complete a medical screening on all incoming offenders in accordance with SOP [401.06.03.032](#), *Receiving Screening*.

### **Mental Health Screening**

All offenders remanded to the IDOC shall receive a brief intake screening. This screening shall include items specific to mental illness and suicidality. This process shall occur in all correctional facilities within 24 hours of the offender's arrival.

### **Suicide Risk**

RDU staff will assess all incoming offenders for suicide risk in accordance with directive [315.02.01.001](#), *Suicide Risk Management and Intervention Program*.

### **Placement**

Pathway (see [section 4](#)) referrals and offender placement shall be based on assessments and classification level with consideration to crime-producing risk and need areas and total risk as indicated by the LSI and any and all other screening and assessment instruments available. Whenever possible, lower-risk offenders shall not be placed with higher-risk offenders.

### **Retained Jurisdiction**

**Note:** For the purpose of this SOP only, the "case management file" shall also be known as the 'central file'.

Within five (5) working days of admission at an RDU, each offender sentenced to a period of retained jurisdiction will attend an orientation, during which the *Basic Rules for Riders* (see directive [324.02.01.001](#), *Retained Jurisdiction*) will be reviewed and signed by the offender. The original will be placed in the central file and a copy will be given to the rider.

When a rider is going to participate in the TC rider program, RDU staff will complete a *Notice of Retained Jurisdiction Inmate Placement* letter (see directive [324.02.01.001](#), *Retained Jurisdiction*) and send it to the sentencing judge. (The *Notice of Retained Jurisdiction Inmate Placement Letter* will also be sent for placements that differ from the

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judge's recommendation, provided the IDOC recommended the TC rider.) A copy of the letter will be placed in section two (2) of the offender's central file.

**Note:** Ensure that the *Notice of Retained Jurisdiction Inmate Placement Letter* contains an estimated date of TC completion.

### OMPs

RDU staff will create an OMP for each offender in accordance with the standards set forth in [section 6](#).

### Youthful Offender Assessments

The RDU staff will assess youthful offenders (any offender under 18 years of age) entering the prison system (see process steps in this section).

#### Youthful Offender Evaluation Considerations

- Age;
- Criminal history;
- TABE assessment and pathway (see [section 4](#)) needs;
- Maturity level;
- Medical assessment;
- Other assessments as necessary;
- Past and present behavior;
- Physical size;
- Psychological interviews; and
- Vulnerability to predatory offenders.

#### Placement Recommendations will be based on:

- Custody level;
- TABE assessment and pathway (see [section 4](#)) needs;
- Medical and mental health needs;
- Protective custody needs; and
- Pathways and educational opportunities available at IDOC correctional facilities.

The youthful offender's status will be re-evaluated at every classification period. If housing changes are recommended, a written evaluation will be processed using the same procedure as noted in the following process steps.

#### Process Steps: Youthful Offender Assessments

Functional Roles and Responsibilities	Step	Tasks
RDU Sergeant (or Designee)	1	Notify the facility head (or deputy warden) within one hour of a youthful offender's arrival to the RDU.

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Functional Roles and Responsibilities	Step	Tasks
<b>Facility Head (or Deputy Warden)</b>	<b>2</b>	Meet with the housing lieutenant and the RDU mental health professional to determine where the youthful offender will be housed during the RDU process.
Facility Head (or Deputy Warden)	<b>3</b>	Make a housing decision.
Facility Head (or Deputy Warden)	<b>4</b>	Notify the RDU manager (or designee) of the youthful offender's housing assignment.
<b>RDU Manager (or Designee)</b>	<b>5</b>	<ul style="list-style-type: none"> <li>• Begin the standard RDU assessment process, and</li> <li>• Notify the RDU clinician.</li> </ul>
<b>RDU Clinician</b>	<b>6</b>	Within seven (7) days, complete a written evaluation with a housing recommendation and forward it to the RDU manager (or designee).
<b>RDU Manager (or Designee)</b>	<b>7</b>	<ul style="list-style-type: none"> <li>• Review the evaluation;</li> <li>• Write a brief statement supporting or modifying the recommendation;</li> <li>• Sign the document; and</li> <li>• Forward it to the facility head.</li> </ul>
<b>Facility Head</b>	<b>8</b>	<ul style="list-style-type: none"> <li>• Review the evaluation;</li> <li>• Write a brief statement supporting or modifying the recommendation;</li> <li>• Sign the document; and</li> <li>• Forward it to the director of Education, Treatment, and Reentry (or designee).</li> </ul>
<b>Director of Education, Treatment, and Reentry (or Designee)</b>	<b>9</b>	<ul style="list-style-type: none"> <li>• Review the evaluation;</li> <li>• Write a brief statement supporting or modifying the recommendation;</li> <li>• Sign the document; and</li> <li>• Forward it to the director of the IDOC.</li> </ul>
<b>Director of the IDOC</b>	<b>10</b>	<ul style="list-style-type: none"> <li>• Review the evaluation;</li> <li>• Decide where the youthful offender will be housed; and</li> <li>• Notify the director of Education, Treatment, and Reentry (or designee) and the facility head of the decision.</li> </ul>
<b>Facility Head</b>	<b>11</b>	<p>In accordance with SOP <a href="#">322.02.01.002</a>, <i>Offender Placement Process</i>, notify the facility move coordinator of the housing decision.</p> <p><b>Note:</b> The facility move coordinator will then coordinate the youthful offender's move in accordance with SOP <a href="#">322.02.01.002</a>.</p>

## 6. OMP Planning for Offenders

### *The Goal of OMP Planning and the Continuum of Care*

The goal of OMP planning is the successful reentry of an offender into the community. To accomplish that goal, case supervisors must consider both the current needs of the

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offender **and** the transition and aftercare components of the OMP upon reentry. PPOs must continue the OMP process in the community.

Case supervisors will use a multi-disciplinary team approach to both offender management in the correctional facility (team case management) **and** reentry into the community (see SOP [607.26.01.002](#), *Structured Reentry Case Management*).

### **Assessment-based OMPs**

OMP's are based on the LSI, TCU-DS II, static 99, TABE, and other assessment or screening instruments. The OMP guides both the offender **and** IDOC staff in reducing the offender's crime-producing attributes.

Crime-producing attributes are prioritized **in the following order**:

- Anti-social and/or pro-criminal attitudes, values, and beliefs
- Criminal associates and isolation from pro-social others
- Temperament and personality factors conducive to criminal activity, such as:
  - ◆ Psychopathy
  - ◆ Weak socialization
  - ◆ Impulsivity
  - ◆ Restless and/or aggressive energy
  - ◆ Egocentrism
  - ◆ Below average verbal intelligence
  - ◆ A history of risk-taking behavior
- Weak problem-solving and/or self-regulation skills
- History of anti-social behavior
- Familial factors such as:
  - ◆ Abuse
  - ◆ Unstructured or undisciplined environment
  - ◆ Criminality in the family
  - ◆ Substance abuse in the family
- Low levels of education or vocational achievement
- Substance abuse

Research shows that the eight (8) attributes above are the major factors that correlate with recidivism. OMP pathway (see [section 4](#)) goals must target the attributes identified in an assessment and prioritized according to severity of the problem. In addition, responsivity issues such as knowledge level and ability must be considered when developing OMP pathway goals.

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### ***What Does an OMP Contain?***

When the offender is under the jurisdiction of the IDOC, pathway (see [section 4](#)) goals, objectives, and action steps, will be designed to help the offender complete needed pathways in accordance with his PED or tentative parole date (TPD).

OMPs will include goals for primary and individual pathways (see [section 4](#)) to target offenders' assessed risk. For example, a probationer or parolee lacking vocational skills combined with a poor work history should have an individual pathway goal for vocational skill development. OMPs will also contain the following:

- **Objective:** Behavioral, measurable and within the offender's ability to achieve.
- **Offender action plan:** Steps necessary, within the offender's ability, to accomplish the pathway goal.
- **Case supervisor step:** Steps to monitor and support the offender's action steps. Must be specific (i.e., time frames for monitoring offender action step, identification of agency providing treatment), achievable, and provide accountability and support for the offender.
- **Domain:** The crime-producing attributes targeted.
- **Goal source:** Who created or ordered the pathway goal.
- **Goal priority:** Developed from assessment instruments and based on need priority.
- **Start date:** The date the offender is estimated to begin the pathway goal, which is not to exceed three (3) years from the goal development date.
- **Expected completion date:** The date the offender is estimated to end the pathway goal.
- **Actual completion date:** The date the offender successfully completes the pathway goal. (The inability to successfully complete the goal will be cause for the goal to be end-dated with a goal 'completion type' selected.)
- **Completion comments:** Optional comments related to the completion or inability to complete.
- **Goal review:** All pathway goals will be reviewed annually for continued appropriateness and still timely for the assessed needs of the offender.

**Note:** Education staff will review pathway goals when it is appropriate to facilitate the programmatic process relative to the offender's academic or vocational needs. Educational staff shall ensure all appropriate academic or vocational coursework is completed as indicated by the OMP or TABE assessment results. For further information regarding education see SOP [607.26.01.012](#), *Education Practices, Procedures, and Placements*.

### ***Developing the OMP***

Case supervisors and PPOs develop and monitor pathway (see [section 4](#)) goals for offenders. The OMP (located within the CIS) is the overall pathway management tool for offenders.



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**Note:** Each offender should only have one OMP in the OMP module, yet the OMP can contain multiple pathway goals, objectives, and action steps. Additional goals can be added to an existing OMP, but new OMPs should not be created.

### OMP Module (Located Within CIS)

- **C-notes:** A section in the OMP module where correctional facility staff documents all follow-up actions regarding the offenders' pathways (see [section 4](#)).
- **Class and wait list:** A section in the OMP module where correctional facility staff documents education (class) needs.
- **Release issues:** A section in the OMP module where correctional facility staff logs any issues that will impede the offender's progress upon release.
- **Supervision contact notes:** A section in the OMP module where PPOs place pathway (see [section 4](#)) notes.

### Correctional Facility Process

#### Term Offenders

RDU program staff members will verify if an offender has an OMP. If no OMP exists, RDU program staff members will create a plan. If an OMP exists, RDU program staff members will assign primary and individual pathways (see [section 4](#)). If an OMP was previously completed, RDU program staff will close out all pathway goals with a date and goal 'completion type'. This includes, but is not limited to:

- End-dating all prior pathway goals with the actual date and completion type.
- Creating any newly assessed pathway goals with a completed objective.

In the RDU, when a new pathway (see [section 4](#)) goal is written, the RDU staff will write 'case supervisor will develop' in the case supervisor step of the OMP module (located within the CIS). Staff responsible for assigning the offender to a case supervisor caseload will initiate the first offender management (OM) review which is 10 days after assignment. After initial development at the RDU, a case supervisor at the receiving correctional facility is responsible for OMP oversight.

Within 30 days (but not more than 30 days) of an offender being assigned to a caseload, the case supervisor will check for a scheduled OM review and develop, review, or modify an offender's pathway (see [section 4](#)) goal in accordance with this SOP and the [Pathways for Success Manual](#).

**Note:** There is an exception to the above 30 day requirement if the offender entered the RDU having passed his PED. The exception would be to have the pathway goal in place within 15 days of the offender being assigned to the caseload.

The case supervisor is responsible for (a) ongoing modification and monitoring compliance with pathway (see [section 4](#)) goals, and (b) keeping documentation current in the narrative section of the OMP module and case management notes (c-notes).

Case supervisors will review pathway (see [section 4](#)) goals with each offender on their caseload at least once every 12 months. OMP reviews can be conducted in conjunction with scheduled reclassifications.



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**Note:** Correctional facilities will establish contact standards in accordance with [section 8](#) and SOP [607.26.01.002](#), *Structured Reentry Case Management*.

### **Retained Jurisdiction Offenders (Riders)**

For offenders sentenced to retained jurisdiction (riders), the receiving correctional facility case supervisors will develop and monitor the pathway (see [section 4](#)) goals.

When an offender is assigned to a caseload, the case supervisor will develop, review, or modify an offender's OMP within two (2) weeks of the case being assigned. During the retained jurisdiction, case supervisors will review the OMP and the offender's progress at least once per month and keep the pathway (see [section 4](#)) goals and narrative section (located in the OMP module of the CIS) current in accordance with the case supervisor step (also located in the OMP module).

### **Probation and Parole Districts Process**

The PPO is responsible for reviewing the institutional pathway for an offender and ensuring that any aftercare component is fulfilled. Any assigned programming will be entered in the OMP module (located within the CIS) and monitored for attendance and completion. Documentation regarding programming will be kept current in the OMP module. PPOs will write their follow-up notes in accordance with the case supervisor step in the supervision contact notes section of the CIS.

When an offender is assigned to a caseload, the supervising PPO will develop, review, or modify an offender's OMP in accordance with initial sign-up activities described in SOP [701.04.02.001](#), *Probation and Parole Supervision Strategies*.

### **Referrals**

The case supervisor will refer the offender to programs that properly match selected primary and individual pathways (see [section 4](#)) that address his crime-producing needs. Assessment or screening instruments are designed and implemented to assist the case supervisor in making referral decisions. The case supervisor will utilize pathway-specific criteria and appropriate time lines for determining required pathways.

All offenders are placed in core programs associated with primary and individual pathways (see [section 4](#)) that address each crime-producing domain identified through the assessment process. The extent of ancillary programming allowed beyond the primary and individual pathways is left to the discretion of the case supervisor and available program capacity of the correctional facility or probation and parole district.

### **Referral Scales**

See the [Pathways for Success Manual](#) for referral criteria for all primary and individual pathways (see [section 4](#)). All deviations from assessed pathways will require that a *Program Exception Request Form* be completed and approved in accordance with [section 10](#).

### **Process Steps: OMP Development**

Functional Roles and Responsibilities	Step	Tasks CIS steps are in bold
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<b>Functional Roles and Responsibilities</b>	<b>Step</b>	<b>Tasks</b> <b>CIS steps are in bold</b>
<b>Presentence Investigator</b>	<b>1</b>	<ul style="list-style-type: none"> <li>Administer an LSI and TCU-DS II in accordance with this SOP, and</li> <li><b>Record the results in the OMP module (located within the Corrections Integrated System [CIS]).</b></li> </ul> <p><u>Note:</u> If the offender is placed on probation, skip to step 6.</p>
<b>RDU Staff</b>	<b>2</b>	<p>Based on the LSI, TCU-DS II, static 99 and TABE assessment scores recorded in the OMP module (located within the CIS), recommend an initial pathway (see <a href="#">section 4</a> of this SOP) for the offender during the intake process.</p> <p><u>Note:</u> For further information regarding TABE assessments, see SOP <a href="#">607.26.01.012</a>, <i>Educational Practices, Procedures, and Placements</i>.</p>
RDU Staff	<b>3</b>	Consider the pathways requirements referenced in <a href="#">section 4</a> of this SOP to ensure the offender is screened for pathway based on the inclusion and exclusion criteria (see <a href="#">section 4</a> of this SOP).
RDU Staff	<b>4</b>	<p><b>Check the existing pathway goals for accuracy and:</b></p> <ul style="list-style-type: none"> <li><b>If accurate</b> – create the OMP and first goal in the OMP module.</li> <li><b>If goals are in the OMP that have not been completed but are still needed</b> – leave them open.</li> <li><b>If goals exist in the OMP that are not end-dated but are complete or not assessed for need any longer</b> – end-date them with the actual date of completion and the completion type.</li> <li><b>If inaccurate</b> – end-date the goal(s) with an end-date of 12/25/1900.</li> </ul>
<b>RDU Case Supervisor Assignor</b>	<b>5</b>	Create the offender management (OM) review in the OMP module (located within the CIS) for the first assigned case supervisor (or PPO).
<b>Case Supervisor (or PPO)</b>	<b>6</b>	<p>Review and/or update the LSI, TCU-DS II, and other assessments and screenings in the OMP module (located within the CIS), presentence report, and any other pertinent historical information.</p> <p><u>Note:</u> If a termor, also see <a href="#">section 7</a> of this SOP.</p>
Case Supervisor (or PPO)	<b>7</b>	<b>Develop or update the pathway (see <a href="#">section 4</a> of this SOP) goals, objectives, and action steps in the OMP module based on the scores in the LSI and other assessments, prior progress, and/or any recommendations from the RDU.</b>
Case Supervisor (or PPO)	<b>8</b>	<ul style="list-style-type: none"> <li><b>Review the current pathway goals, objectives, offender action steps, and recommended pathways with the offender; and</b></li> <li><b>In the OMP module (goal area), enter the date the offender is informed of the goal.</b></li> </ul>

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<b>Functional Roles and Responsibilities</b>	<b>Step</b>	<b>Tasks</b> <b>CIS steps are in bold</b>
Case Supervisor (or PPO)	9	<p><b>At the initial interview and set up of pathways, once the offender has been informed, the case supervisor (or PPO) will check the ‘offender agreed’ box in the OMP module (goal area).</b></p> <p><b>Note: If the offender does not agree, enter a c-note (case supervisors) or a supervision contact note (PPOs) in OMP module that the offender refused, but do not check the ‘offender agreed’ box. Regardless of whether the offender agreed, the process will continue at step 10.</b></p>
Case Supervisor (or PPO)	10	Ensure that the offender is referred to the recommended facilitators for the available recommended pathways according to the timelines set forth in the <a href="#">Pathways for Success Manual</a> .
Case Supervisor (or PPO)	11	<ul style="list-style-type: none"> <li>Monitor the offender’s progress through the recommended pathways;</li> <li><b>Keep an updated and thorough record in the OMP module.</b></li> </ul>
Case Supervisor (or PPO)	12	<b>Periodically review the OMP module for compliance with this SOP and to keep the OMP accurate.</b>

For further assistance with CIS, see your designated CIS super user.

## 7. Case Supervisor Requirements for Case Management of Offenders

This section contains general case management requirements. If more detailed information regarding case management requirements is needed, review the [IDOC Case Management Manual](#).

### ***RDU Case Management Requirements***

The following are standard tasks for case management staff assigned to the RDU. The primary populations include:

- Termers,
- Riders, and
- Parole violators.

RDU staff will complete the following tasks for termers, riders, and parole violators within 14 days (unless there is a documented reason in the CIS for the delay):

### **Termers (or Revoked Riders)**

#### **File Review (consists of both CIS and central file review)**

- Review the presentence report;
- Review the judgment and commitment;
- Review the assessments (i.e., LSI, TCU-DS II) and evaluations (i.e., psychosexual, domestic violence, substance abuse, mental health);

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- Review the probation and/or parole violation reports;
- Review the supervision contact notes and c-note details;
- Review detainer information, medical, and disciplinary offense report (DOR) history;
- Check on any outstanding felony convictions; and
- Classify the offender in accordance with SOP [303.02.01.001](#), *Classification: Offender*.

### **Develop OMPs**

In addition to the process steps in [section 6](#), ensure the following steps are completed (as applicable):

- Update the LSI as needed;
- Update the TCU-DS II as needed;
- Review and assign the appropriate education and/or vocational individual pathway (see [section 4](#)) by the established criteria, and open a goal for the identified individual pathway;
- Determine primary pathway (see [section 4](#)) eligibility by the established criteria, and open a goal for the identified primary pathway;
- Determine any other individual pathway (see [section 4](#)) needs, and open a goal for the identified need based on established criteria (e.g., education, mental health, gender responsive, and family reunification);
- Schedule the next offender management (OM) review; and
- In the c-notes, write a brief synopsis of the offender's history and OMP recommendations.

### **Case Management Meeting**

- Review the custody level;
- Review and explain the pathway recommendation with the offender;
- Answer any questions the offender may have to accomplish the pathways;
- Explain to the offender what happens after the RDU process and discuss the parole preparation process; and
- After the meeting, make any additions or changes to the c-notes.

### **Parole Plans (Parole Violators)**

- Once the parole revocation hearing has taken place, if the offender becomes a termor, the assigned case supervisor will treat the offender as a regular termor and develop primary pathway (see [section 4](#)) plan; and
- If the parole violator is reinstated to parole, the case supervisor will work closely with the offender and the receiving probation and parole district PPO to determine the residence and/or transportation and address any other specific needs of the offender to expedite return to the community.

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## Riders

### Review Files (consists of both CIS and central file review)

- Gather and organize available RDU rider files for review;
- Review the individual rider's Reflections data;
- Review the individual rider's CIS data;
- Review the individual rider's central file;
- Complete and print from CIS a *Rider Placement Evaluation Form* for each offender; and
- Correspond with the appropriate facility move coordinator and/or offender placement group regarding weekly RDU rider transports and/or placements (see SOP [322.02.01.002](#), *Offender Placement Process*).

## Parole Violators

### Case Management Tasks

- Enter pathway goals in the OMP module (located within the CIS);
- Conduct regular OMP reviews with offenders;
- As needed, meet with offenders prior to revocation hearings; (Parole violators will have a primary pathway (see [section 4](#)) established after the parole revocation hearing, but individual pathways can be established beforehand.);
- Update and/or modify OMPs based on Commission of Pardons and Parole decisions; and
- Conduct classification meetings.

### Parole Revocation Hearings

- Give the offenders the Commission of Pardons and Parole's *Notice of Parole Revocation Hearing* form, acquire signatures, give the offenders their copy of the on-site hearing recommendations, and return the forms to the Commission; and
- Prepare a packet on each offender to show pertinent information that the Commission of Pardons and Parole may request from the case supervisor (or designee) attending the hearing.

### Reinstated Offenders

- In conjunction with assigned PPOs, assist in verifying planned residence;
- Work with community contacts to ensure residence placement (if needed);
- If needed, in accordance with SOP [607.26.01.013](#), *Transition and Treatment Funding Program for Offenders*, submit an application for transition funds.
- Arrange for transportation (as needed);
- Communicate with all parties to ensure a smooth process;
- Provide the offenders the resources needed for release planning;

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- Assist the offenders with developing their release plans;
- Work with the Community Corrections Unit, the Commission of Pardons and Parole, and outside agencies to develop the release plans;
- Assist the offenders with obtaining transitional funding (see SOP [607.26.01.013](#));
- Process interstate parole applications through the Interstate Compact Offender Tracking System (ICOTS); and
- Notify concerned parties of pending releases.

## 8. General Correctional Facility Case Management Requirements

The following standards are for all staff tasked to provide case management services for incarcerated offender populations once they have completed the RDU process. (Typically case supervisors provide case management services, but this can vary.)

Upon assignment to a case supervisor caseload, first contact (intake) with the offender will occur within 10 business days. The following are core tasks and are not intended to be all inclusive:

### ***Intake***

- Verify the assigned pathway for appropriateness, and ensure a goal for the appropriate pathway has been opened;
- Review the time lines for the engagement of the pathway, and document the c-notes;
- Identify the priority group status (or case management standards, as follows), and document the c-notes:
  - ◆ **Priority 1** – All offenders who are 12 months or less to PED **or** six (6) months to parole hearing date (PHD), if past PED;
  - ◆ **Priority 2** – All offenders who are 12 to 24 months to PED;
  - ◆ **Priority 3** – All offenders who are within 90 days of eligibility for a self-initiated parole request.
  - ◆ **Priority 4** – All offenders who are 24 to 60 months to PED;
  - ◆ **Priority 5** – All offenders who are more than 60 months to PED **or** have no parole;
- Address, staff with case supervisor, and document in the c-notes, any legal or court issues (e.g., family court issues such as child custody or support; and pending felonies);
- Verify educational and/or vocational individual pathway (see [section 4](#)) needs, and ensure educational and/or vocational goals have been opened and a referral for education (classes) has been accomplished and documented;
- Review medical and/or mental health needs, and ensure appropriate referrals are made and documented;
- Initiate a parole preparation needs review (e.g., Social Security card, birth certificate, drivers license or state ID), and document needs; and

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- Review for family reunification individual needs (e.g., child support, child custody, marital issues, and community support).

### ***Standard Priority Group Monitoring***

#### **Priority 1**

See the [Intake](#) subheading above for case management standards for priority 1. The minimum contact requirement for a priority 1 offender is every 30 to 60 days.

- Confirm the priority group status, and review prior contacts for updates;
- Check for a PHD and a TPD;
- Verify referrals to pathways and attendance (including parole requirements);
- Review ongoing medical and/or mental health needs;
- Review the parole plan and/or re-entry needs (e.g., housing, treatment, Social Security card, birth certificate, drivers license or state ID; and document needs [employment and/or transportation] upon release);
- Review disciplinary behavior (e.g., DORs);
- Review for family reunification needs (child support, child custody, marital issues);
- Initiate interstate compact (if appropriate);
- Address correctional facility housing concerns, behavioral issues, etc.; and
- Ensure any necessary moves are accomplished in collaboration with the appropriate facility move coordinator and/or offender placement group (see SOP [322.02.01.002](#), *Offender Placement Process*).

#### **Priority 2**

See the [Intake](#) subheading above for case management standards for priority 2. The minimum contact requirement for a priority 2 offender is every 90 days.

- Confirm the priority group status, and review prior contacts for updates;
- Verify the assigned pathway for appropriateness;
- To begin pathway programming, review the pathway for referrals to education, correctional facility employment, and housing placement ;
- Review disciplinary behavior (e.g., DORs);
- Review family reunification plan and/or issues; and
- Review the re-entry process, to include: (a) the expectations of the Commission of Pardons and Parole, (b) the need for saving money for release if offered employment opportunities, (c) financial obligations (e.g., child support, fines, restitution, housing), and (d) and other release issues.

#### **Priority 3**

Self-initiated Parole Request (SIPR) Requirements -- An offender is eligible to submit a SIPR six (6) months after his first parole hearing regardless of the decision. If that SIPR is denied, he is eligible to submit another SIPR 12 months later. As long as he



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is denied, he can continue to submit a SIPR annually. See the [Intake](#) subheading above for case management standards for priority 3.

- 90 days prior to the next eligible SIPR, the case supervisor will conduct a direct contact with offenders who are SIPR eligible;
- The case supervisor will determine the likelihood of engaging the offender in the assigned or assessed eligible primary and/or individual pathway (see [section 4](#)); and
- By signing off on the SIPR form (provided by the Commission of Pardons and Parole), the case supervisor is indicating that (a) he has discussed the SIPR with the offender, (b) the offender is aware of his intent to submit the SIPR, and (c) he will refer the offender to the appropriate pathway if the SIPR is approved.
- Through motivational interviewing, the case supervisor will work to reduce barriers and assist the offender in change thinking; and
- If the offender agrees to engage in the assigned pathway (see [section 4](#)), the case supervisor will refer and/or enroll the offender to/in core programs to meet the requirements for a primary and/or individual pathway.

#### **Priority 4**

See the [Intake](#) subheading above for case management standards for priority 4. The minimum contact requirement for a priority 4 offender is every 180 days.

- Confirm the priority group status, and review prior contacts for updates;
- Verify the assigned pathway for appropriateness;
- Review correctional facility placement is in line with the pathway;
- Review disciplinary behavior (e.g., DORs);
- Review participation in programs leading to pathway, education, and medical and/or mental health concerns; and
- Facilitate correctional facility employment (as appropriate).

#### **Priority 5**

See the [Intake](#) subheading above for case management standards for priority 5. The minimum contact requirement for a priority 5 offender is every 365 days.

- Confirm the priority group status, and review prior contacts for updates;
- Verify the assigned pathway for appropriateness;
- Review correctional facility placement is in line with the pathway;
- Review disciplinary behavior (e.g., DORs);
- Review participation in programs leading to pathway, education, and medical and/or mental health concerns; and
- Facilitate correctional facility employment (as appropriate).



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**Note:** For offenders sentenced to life with no parole, a file review will be done in conjunction with the yearly re-classification, and the offenders will be seen on an as-needed basis.

### ***Parole Hearing Process***

The parole hearing officer interview schedule (four [4] months prior to the hearing month) will prompt all assigned case supervisors to write a status summary in the CIS. Upon receiving notice of the parole hearing officer's interview schedule, case supervisors will develop and write a status summary in the parole module of the CIS. (The summary is located in CIS under the 'parole' contact type.)

**Note:** Case supervisors will ensure that the status summary will be available in the CIS for the parole hearing officer at least 10 business days prior to the parole hearing interview.

The summary will address the following information:

#### **RDU Recommendations**

- Primary pathway (see [section 4](#)) assignment; and
- Individual pathway needs (e.g., education, vocational education, mental health, family reunification, and gender responsive).

#### **OMP**

All established goals based on pathway-assessed needs.

#### **Status of OMP**

- Education,
- Pathways, and
- Work.

#### **Disciplinary Matters**

##### **Level of Care (LOC) Designation**

- CMHS – Correctional mental health services
- ICMHS – Intermediate correctional mental health services
- MHC – Mental health clear
- MHP – Mental health prior

**Note:** This section will indicate LOC only and will also be used to document referrals to correctional facility clinicians, when appropriate. Correctional facility case supervisors have access to any mental health concerns, issues and/or diagnosis on a need-to-know basis. Correctional facility clinicians (in conjunction with case supervisors) will facilitate and coordinate any follow-up mental health services for offenders.

#### **Parole Plan**

- Residence,

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- Work, and
- Aftercare.

### ***Parole Hearing Interviews***

#### **Case Supervisor Responsibilities**

It is the responsibility of the case supervisor (or a person designated at each correctional facility) to:

- Ensure pre-release specialists (PRS) are assigned to the RDU to begin potential release plans with offenders upon their arrival at the correctional facility;
- Assign a staff member to attend all regular parole hearings or parole revocation hearings. (This duty can be rotated according to correctional facility need.);
- Ensure assigned staff members have case summary updates, so that they can provide information to the Commission of Pardons and Parole as needed;
- Facilitate ordered sex offender and psychological reports, and ensure they are availability to the parole hearing officer prior to the scheduled parole hearing interviews;
- Monitor the parole hearing interview schedules posted on the Electronic Department of Correction (E-DOC);
- Ensure that the offenders on his caseload are given a Commission of Pardons and Parole *Personal History Questionnaire* prior to their parole hearing interviews and informed of their parole hearing interview date and time;
- Ensure assigned staff members email parole hearing and parole revocation hearing results to the case supervisors on a daily basis or within 24 hours of the scheduled hearing date; and
- Review the parole hearing officer's recommendations, post the recommendations in the c-notes section of the CIS, inform the offender of the recommendations, and ensure that all requirements of the Commission of Pardons and Parole are fulfilled prior to the Parole Board hearing;

Because the process of delivering personal history questionnaires to offenders prior to their parole hearing interviews **and** notifying them of the interview date and time may vary from correctional facility to correctional facility, it is recommended that facilities document the process (e.g., in a field memorandum), and forward a copy to the Education, Treatment, and Reentry Unit. The case supervisor will also document the following in the CIS:

- The date(s) the questionnaires were delivered to the offenders;
- The parole hearing interview date and time; and
- The assigned parole hearing officer's name.

#### **Correctional Facility Records Custodian Responsibilities**

In preparation for the parole hearing interviews, correctional facility records custodians (or designees) will ensure the parole hearing interview packets are

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submitted to the Commission of Pardons and Parole three (3) months prior to the hearing.

### ***Post Parole Hearings***

Case supervisors will meet with their assigned offenders within five (5) days of the Commission of Pardons and Parole's *Notice of Action Taken* list being posted in Reflections. At that time, a *Program Exception Request Form* or miscellaneous review (MR) (see [section 10](#)) would be submitted, if necessary. Case supervisors will write a status summary note in the CIS. The status summary note will include:

- The status of both primary **and** individual pathway (see [section 4](#)) referrals;
- Parole planning (utilizing parole checklists); and
- A plan for monitoring progress and addressing any barriers related to the offender's release.

### ***Structured Reentry***

As part of the priority 1 requirement (see the [Standard Priority Group Monitoring](#) subheading above), the following reentry items will be addressed by case supervisors:

- Review the Commission of Pardons and Parole's *Notice of Action Taken* list for all offender requirements;
- Address and facilitate any Sex Offender Classification Board (SOCB) evaluations (or other evaluations) ordered by the Commission of Pardons and Parole;
- Submitted MR requests (see [section 10](#)) within 30 days following the parole hearing or parole revocation hearing date;
- Submit a final parole plan for a Request for Investigation (RFI);
- Discuss all RFI rejections with the offender within five (5) days of receiving the rejection notification so that an alternative parole plan can be sought by the offender. The case supervisor will:
  - ◆ Document that the offender is working on an alternative plan, and
  - ◆ Document any updates and submit them as soon as the plan is viable;

**Note:** The alternative parole plan should be developed and submitted within 10 working days. If the documented rejection information is insufficient for the case supervisor to assist the offender in developing an alternative plan, the case supervisor will contact the reviewing PPO.

- When the Commission of Pardons and Parole assign a release date, notify the offender and develop a release plan;
- On the release date, ensure the offender signs a *Parole Contract* (provided by the Commission of Pardons and Parole) prior to release;
- If any event or travel arrangements will affect the offender's arrival date or time to the district, contact the PPO by phone to inform him (or send an e-mail if phone contact is unsuccessful); and
- Closeout the pathway goal when the offender is released.

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**Note:** PPOs will initiate the aftercare goal when the offender arrives in the district.

## 9. General Direct Service Requirements

This section contains basic general direct service requirements. If more detailed information regarding general direct service requirements is needed, review the [IDOC Direct Services Manual](#).

Direct service requirements are meant for all staff whose primary or individual job requirements involve the delivery of core program services to offenders housed in correctional facilities and probation and parole districts. The primary positions affected by these requirements are drug and alcohol rehabilitation specialists (DARS), psychosocial rehabilitation specialist (PSRS), and pre-release specialists (PRS) job classes.

### ***Drug and Alcohol Rehabilitation Specialists (DARS)***

DARS direct service requirement is 80% of scheduled time **or** 32 of 40 hours per week when staff do not have an assigned caseload of offenders to supervise.

DARS direct service time will be devoted to group delivery and tasks supportive of group delivery, OMP documentation, homework review, collateral contacts, or scheduled staffing meetings for example. (Exceptions are based on correctional facility or probation and parole district staffing needs and makeup. Exceptions should be submitted in writing (letter or memorandum) to the facility head or district manager [as applicable]. Exceptions will need to be approved by the facility head or district manager [as applicable] and the director of Education, Treatment, and Reentry [or designee]).

### ***Psychosocial Rehabilitation Specialist (PSRS) and Pre-release Specialists (PRS)***

Correctional facility or probation and parole district psychosocial rehabilitation specialists and PRS who provide case management services (see [section 7](#) and [section 8](#)) will devote 80% of scheduled time **or** 32 of 40 hours per week to case management tasks. Case management tasks will include individual contacts with offenders; developing pathways (see [section 4](#)), activities, and tasks related to the parole release process; essentially all tasks in support of the offenders' pathway; adjustment to incarceration; crisis management; and preparation for re-entry. In the case of PRS, case management services could include the delivery of the pre-release curriculum. Included in the 32 hours per week, a PRS or PSRS has an expectation to provide four (4) groups per week in addition to their case management responsibilities. If core group needs are met by the DARS, ancillary programs may be provided by the PRS or PSRS. (Exceptions are based on correctional facility or probation and parole district staffing needs and makeup. Exceptions should be submitted in writing (letter or memorandum) to the facility head or district manager [as applicable]. Exceptions will need to be approved by the facility head or district manager [as applicable] and the director of Education, Treatment, and Reentry [or designee]).

### ***DARS, PSRS, and PRS Involved in Treatment Programs***

For treatment programs such as the retained jurisdiction (rider) program, the TC program, or sex offender treatment program where program staff (either psychosocial rehabilitation specialists, PRS, or DARS) fill dual functions of case supervision and pathway delivery, the needs of the program will determine how program staff's 80% time will be split between case supervision and pathway delivery. The splitting of time will need to be approved by the director of Education, Treatment, and Reentry (or designee).

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### ***Correctional Facility Direct Services Staff***

Correctional facility direct services staff will:

- Deliver only those programs in support of primary and individual pathways (see [section 4](#)); and
- Maintain focus on the core programs in support of primary and individual pathway (see [section 4](#)) needs of the incarcerated offender population.

### ***Probation and Parole District Treatment Staff***

Probation and parole district treatment staff will maintain primary focus on transition services for TC and retained jurisdiction (rider) graduates for both male **and** female offenders. The classes will include TC aftercare, retained jurisdiction (rider) aftercare, cognitive self-change (CSC) 2, parole process group, CAPP aftercare, and other specific core programs in support of this population. If all primary focus needs are met, other core program offerings may be delivered. All other probationer and parolee needs will be met by referrals to private provider networks.

### ***All Direct Services or Treatment Staff***

Core offerings will be delivered in 1.5 hour sessions two (2) times per week. The remaining .5 hour will be dedicated to group preparation and proper and timely documentation, to include OMP (located within the CIS) entry for served offenders. All OMP entries will be completed as part of the .5 hour dedicated to this function and will be accomplished immediately following the class just delivered. Attendance (to include failures to attend) and any important notes will be entered into the OMP. For all 'failures to attend', an email will be generated to the case supervisor or PPO. (There are no anticipated exceptions to this requirement. Real time data is critical to the success of this process.)

## **10. Special Requirements**

This section contains general information regarding special requirements. If more detailed information regarding special requirements is needed, review the [IDOC Miscellaneous Review and Program Exception Manual](#).

**Note:** If either of the below forms needs to be expedited, enter that information on the form.

### ***Miscellaneous Review (MR)***

When staff becomes aware of new circumstances that indicate an offender cannot complete the recommendation from the Commission of Pardons and Parole prior to release, the MR form needs to be submitted to Education, Treatment, and Reentry Unit quality assurance staff. The MR form shall then be reviewed by the director of Education, Treatment, and Reentry (or designee).

The MR form is to be used for offenders who currently have a TPD. For these offenders, examples may include: not meeting pathway criteria; having medical, mental health, or educational limitations or needs; or other related issues.

### ***Program Exception Request Form***

The *Program Exception Request Form* needs to be requested when (a) staff believes a certain pathway would be beneficial to the offender, but the offender does not meet the criteria for that pathway; or (b) an offender's primary pathway is not appropriate due to

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medical or mental health concerns **or** when assessments cannot be administered to determine a primary pathway (see [section 4](#)).

**Example:** An offender who has a primary history of driving under the influence (DUI) is assessed pathway 4A; however, the case supervisor reviews and indicates that the offender needs more specific programming and recommends pathway 4B, which includes moral reconnection therapy (MRT) and driving the right way (DRW).

**Example:** A sex offender is not eligible for a static 99 assessment to determine the primary pathway placement, **or** an offender is legally blind or handicapped and is not able to complete a TABE or other assessments.

**Note:** A primary pathway cannot be changed without an approved *Program Exception Request Form*.

**Note:** A primary pathway cannot be assigned unless all required assessments that determine placement are administered and accurate.

The completed *Program Exception Request Form* needs to be submitted to Education, Treatment, and Reentry quality assurance staff. The Program Exception Request Form shall then be reviewed by the director of Education, Treatment, and Reentry.

## REFERENCES

Directive [315.02.01.001](#), *Suicide Risk Management and Intervention Program*

Directive [324.02.01.001](#), *Retained Jurisdiction*

Directive [607.26.01.001](#), *Program Standards Committee, Development and Evaluation*

Directive [702.04.02.001](#), *Presentence Investigation and Report*

Idaho Department of Correction Manual, [Case Management](#)

Idaho Department of Correction Manual, [Core Assessments](#)

Idaho Department of Correction Manual, [Correctional Mental Health Service System](#)

Idaho Department of Correction Manual, [Direct Services](#)

Idaho Department of Correction Manual, [Miscellaneous Review and Program Exception](#)

Idaho Department of Correction Manual, [Pathways for Success](#)

IDAPA 50.01.01, *Rules of the Commission of Pardons and Parole*

Interstate Commission for Adult Offender Supervision (ICAOS), [ICAOS Rules \(effective February 17, 2008\)](#)

*Program Exception Request Form*

Standard Operating Procedure [303.02.01.001](#), *Classification: Offender*

Standard Operating Procedure [322.02.01.002](#), *Offender Placemen Processt*

Standard Operating Procedure [401.06.03.032](#), *Receiving Screening*

Standard Operating Procedure [607.26.01.002](#), *Structured Reentry Case Management*

Standard Operating Procedure [607.26.01.012](#), *Educational Practices, Procedures, and Placements*

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Standard Operating Procedure [607.26.01.013](#), *Transition and Treatment Funding Program for Offenders*

Standard Operating Procedure [701.04.02.001](#), *Probation and Parole Supervision Strategies*

Standard Operating Procedure [701.04.02.006](#), *Sex Offenders: Supervision and Classification*

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